SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)		R LINE eck onl	: NUMBEI v one)	∺ :	L P.	AGE 2	22 / 30	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	and address of any pointed of	J	20 10 30	mon contin	Dutions ii	OIII SUOII	COMMIN		
I.P.H.F.H.A. Inc. Political Action Committee	e, Inc.								
Full Name (Last, First, Middle Initial) A- FRIENDS OF KATHERINE HARRIS				action ID		6252			
			M 1 0 5	of Disburs	ement) 1	Y Y	Y _ Y	1	
Mailing Address P. O. Box 25187				0.5		0 1	2 0	ŏ6 [°]	
	State Zip Code FL 34277			Amou	nt of Each	Disburs	ement t	his Pe	riod
Purpose of Disbursement	12 04211	v	_				25	00.00	
Candidate Name Category/									
		Type	-						
Office Sought: X House Disburse	ment For: 2006 Primary X General								
President	Other (specify)								
State: FL District: 13									
Full Name (Last, First, Middle Initial) FRIENDS OF MIKE SODREL				action ID of Disburs		6291			
			M	_	29 /	Y Y	ŏ 6 °	1	
Mailing Address 702 North Shore Drive S	uite 500			0 6		29	20	0,6	
City Jeffersonville	State Zip Code IN 47130			Amou	nt of Each	Disburs	ement t	his Pe	riod
Purpose of Disbursement	47130	-	_				10	00.00	
Condidate Name		0 :	ب.						
Candidate Name	'	Catego Type	-						
	ment For: 2006								
Senate President	Primary X General Other (specify) ▼								
State: IN District: 09	Care (epsen)								
Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS				action ID		8285			
			M	of Disburs	29	YYY	Y Y	1	
Mailing Address 3161 DIXIE HIGHWAY,	SUITE F			0 6	2	29	20	ŏ6 [°]	
City ERLANGER	State Zip Code KY 41018			Amou	nt of Each	Disburs	ement t	his Pe	riod
Purpose of Disbursement			_	<u> </u>			10	00.00)
Candidate Name		Catego Type							
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General								
President	Other (specify) ▼								
State: KY District: 4									
SUBTOTAL of Disbursements This Page (optional)							450	00.00	
TOTAL This Period (last page this line number only)			•						